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BY: Chrissoula Lambriodes

DATE: 3/17/00



Chrissoula Lambriodes

PATENT

Attorney Docket: KERMANI-43

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of: Bahram Kermani

Serial No. 09/487,522

Group Art Unit: 2776

Filed: 01/19/2000

Examiner: Not Yet Assigned

For: METHOD AND SYSTEM FOR ABSTRACTING ELECTRONIC DOCUMENTS

TC 2700 MAIL ROOM
APR 20 2000

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Assistant Commissioner for Patents
Office of Initial Patent Examination
Customer Service Center
Washington, D.C. 20231

Dear Sir:

REQUEST FOR CORRECTED FILING RECEIPT

Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.

Presently there is no entry for ATTY.DOCKET.NO. Please correct the ATTY.DOCKET.NO to read "**KERMANI-43**" and send us a corrected filing receipt.

Respectfully submitted,

Steven E. Koffs

Steven E. Koffs
Registration No. 37,163
Attorney for Applicant(s)
(215) 979-1250

Dated: 3/17/00
Duane, Morris & Heckscher LLP
4200 One Liberty Place
Philadelphia, PA 19103-7396

Attachment

Y0242-000205

PH3\649409.1

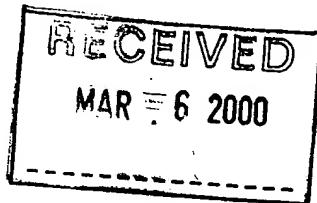
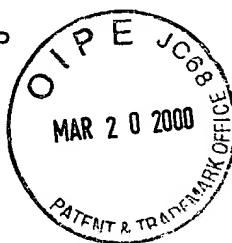
FILING RECEIPT

OC00000004974854

**UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office**Address: ASSISTANT SECRETARY AND
COMMISSIONER OF PATENT AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET.NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/487,522	01/19/2000	2776	930	Kermani-43	3	1	4

William H. Murry
Duane Morris & Heckscher LLP
4200 One Liberty Place
Philadelphia, PA 19103-7396



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Date Mailed: 02/25/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Bahram G. Kermani, Whitehall, PA ;

Continuing Data as Claimed by Applicant**DOCKETED****Foreign Applications****Foreign filing license granted on 02/24/2000****Title**

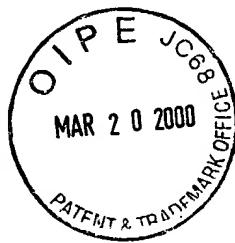
Method and system for abstracting electronic documents

Preliminary Class

707

Data entry by : BRITTON, PAULA**Team : OIPE****Date: 02/25/2000**

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Title 35, United States Code, Section 184
Title 37, Code of Federal Regulations, 5.11 & 5.15**



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Bib Data Sheet


**UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office**

 Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

SERIAL NUMBER 09/487,522	FILING DATE 01/19/2000 RULE -	CLASS 707	GROUP ART UNIT 2776	ATTORNEY DOCKET NO. KERMANI-430
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APPLICANTS

Bahram G. Kermani, Whitehall, PA ;

**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED ..**

** 02/24/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING 3	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

William H. Murry
 Duane Morris & Heckscher LLP
 4200 One Liberty Place
 Philadelphia ,PA 19103-7396

TITLE

Method and system for abstracting electronic documents

FILING FEE RECEIVED 930	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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